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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

<u> </u>		
Name of Offering (check if this	is an amendment and name has change, and indicate	change.)
Series A Preferred Stock Offering		
Filing Under (Check box(es) that apply):	Rule 504	Section 4(6) ULOE
Type of Filing: New Filing	Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the i	ssuer	
Name of Issuer (check if this is an amendm	ent and name has changed, and indicate change.)	
Geneve Bio, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
505 North Wolf Rd	Wheeling, IL 60090	847-419-8922
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	(Number and Street, City, State, Zip Code)	relephone (tumber (mendanig Area code)
(if different from Executive Offices)		
Brief Description of Business Manufacture and	d Market bio/pharmaceutical and related products	PROCESSER
		₹ " "IOOFOOEF
		Aug 4 , and
		AUG 1 4 2007
Type of Business Organization		TALONGO
corporate	limited partnership, already formed	other (please specify): THOMSON
business trust	limited partnership, to be formed	
	Month Year	
Actual or Estimated Data of Incorporation or C	Organization: 0 7 0 6	☐ Actual ☐ Estimated
Actual or Estimated Date of Incorporation or C		
Jurisdiction of incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation of CN for Canada; FN for other foreign jurisdiction)	DE
	Civitor Canada, Fivitor other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501

et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

		A. BASIC IDENTII	FICATI	ON DATA		_		
2. Enter the information requ		•		_				
•	•	r has been organized wit		•				
 Each beneficial owner securities of the issuer 		r to vote or dispose, or	direct	the vote or dispositi	on of	, 10% ог п	поге о	f a class of equity
		orporate issuers and of c	orporat	e general and manag	ging p	artners of p	partne	rship issuers; and
 Each general and mana Check Box(es) that Apply: 	Promoter	Beneficial Owner	×	Executive Officer	\boxtimes	Director	$\overline{}$	General and/or
Check Box(es) that Apply:	Figurete	Beneficial Owner		Executive Officer		Director		Managing Partner
Full Name (Last name first, if in Byron Miller	ndividual)							
Business or Resident Address 505 North Wolf Rd. Wheeling,	•	cet, City, State, Zip Code)				•	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	\boxtimes	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if in Bob Geras	ndividual)							
Business or Resident Address 505 North Wolf Rd. Wheeling,	•	eet, City, State, Zip Code)				·	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if it C. Richard Piazza	ndividual)							
Business or Resident Address 505 North Wolf Rd. Wheeling,		eet, City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in Jay Treat, PhD.	ndividual)							
Business or Resident Address 505 North Wolf Rd. Wheeling,	•	eet, City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if in Ragab El-Rashidy, Ph.D.	ndividual)							
Business or Resident Address 505 North Wolf Rd. Wheeling,	•	eet, City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if in Robert Fait, O.D.	ndividual)							
Business or Resident Address 505 North Wolf Rd. Wheeling,	•	cet, City, State, Zip Code)		-			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if it	ndividual)							
Business or Resident Address	(Number and Str	eet, City, State, Zip Code)					
	(Use blank she	et, or copy and use addition	onal cop	ies of this sheet, as n	ecessa	ry.)		

B. INFORMATION ABOUT OFFERING		
	Yes	No No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in his offering? Answer also in Appendix, Column 2, if filing under ULOE.		\boxtimes
2. What is the minimum investment that will be accepted from any individual?	\$ 25,00	า
2. What is the minimum investment that will be accepted from any individual:	Yes	
3. Does the offering permit joint ownership of a single unit?		No ⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a perso to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer	,	
State in Which Person Listed Has Solicited or Intends to Solicit Purchases		
(Check "All States" or check individual States)	☐ All St	ates
[MT] [NE] [NV] [NH] [NH] [NJ] [NM [NY] [NC] [NC] [ND] [OH] [OK] [[HI]	[ID]
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
State in Which Person Listed Has Solicited or Intends to Solicit Purchases (Check "All States" or check individual States)	☐ All St	atac
[AL] [AK] [AZ] [AR] [ICA] [CO] [CT] [DE] [DC] [FL] [GA]	נאט 🗆	
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	[MS]	[MO] [PA]
Full Name (Last name first, if individual)		. ,
Business or Residence Address (Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·	
Name of Associated Broker or Dealer		
State in Which Person Listed Has Solicited or Intends to Solicit Purchases		
(Check "All States" or check individual States)	☐ All St	ates
[MT] [NE] [NV] [NH] [NH] [NJ] [NM [NY] [NC] [NC] [ND] [OH] [OH] [OK]	[HI]	[ID]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$_525,000	\$_525,000
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	
	Other (Specify)	\$	\$
	Total	\$ <u>525,000</u>	\$ <u>525,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	7	\$ <u>525,000</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	7	\$ <u>525,000</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question I	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A	·	\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fces	🛛	\$_15,000
	Accounting Fees		S
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	S
	Total	_	\$ 15,000

•	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AN	D USE	OF PROCEEDS	<u> </u>
	tion 1 and total expenses furnished in response	te offering price given in response to Part C onse to Part C - Question 4.a. This difference	e is the		\$ <u>510,000</u>
5.	used for each of the purposes shown. If th	gross proceeds to the issuer used or propose e amount for any purpose is not known, fur estimate. The total of the payments listed muth in response to Part C - Question 4.b above.	nish ar	1	
				Payments to Officers, Directors & Affiliates	Payment to Others
	Sales and fees			\$	s
	Purchase of real estate			\$	
	Purchase, rental or leasing and installation of n	nachinery and equipment		S	
	Construction or leasing of plant buildings and t	facilities		\$	s
	Acquisition of other business (including the va offering that may be used in exchange for the a issuer pursuant to a merger)	ssets or securities of another		\$	
	Repayment of indebtedness			\$	□ s
	Working capital			s	⊠ \$ 510,000
				\$	S
	Other (specify):			\$	s
	Column Totals			S	
	Total Payments Listed (column totals added)			⊠ \$ <u></u>	510,000
		D. FEDERAL SIGNATURE			
sig inf	mature constitutes an undertaking by the issuer t	by the undersigned duly authorized person. If the ofurnish to the U.S. Securities and Exchange Coredited investor pursuant to paragraph (b)(2) of F	mmissi	on, upon written r 2. Date	
sig inf Iss	mature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accurate	o furnish to the U.S. Securities and Exchange Coredited investor pursuant to paragraph (b)(2) of F	mmissi Lyfe 502	on, upon written r	
sig inf Iss Ge	mature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accurate (Print or Type)	o furnish to the U.S. Securities and Exchange Coredited investor pursuant to paragraph (b)(2) of F	mmissi Lyfe 502	on, upon written r 2. Date	

__ ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 16

		E. STATE SIGNATURE
	ny party described in 17 CFR 230.262 preser	ently subject to an of the disqualification provisions of such
		See Appendix, Column 5, for state response.
	undersigned issuer hereby undertakes to fin D (17 CFR 239.500) at such times as rec	furnish to any state administrator of any state in which this notice is filed, a notice on quired by state law.
	undersigned issuer hereby undertakes to fi er to offerees	furnish to the state administrators, upon written request, information furnished by the
limit	ted Offering Exemption (ULOE) of the sta	uer is familiar with the conditions that must be satisfied to be entitled to the Uniform ate in which this notice is filed and understands that the issuer claiming the availability ng that these conditions have been satisfied
	uer has read this notification and knows the gned duly authorized person.	ne contents to be true and has duly caused this notice to be signed on its behalf by the
	Print or Type) Bio, Inc.	Signature Sun & Mile Date July 1/2007
``	orint or Type)	Title (Print or Type)
Ryron M	Miller	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	2 3				5					
	to non-a	l to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA								_		
СО										
CT										
DE										
DC										
FL										
GA										
HI										
ID										
IL		X	Equity	4	325,000					
IN						<u> </u>				
ΙA										
KS										
KY		x	Equity	1	100.000					
LA							. =====			
ME										
MD										
MA	<u> </u>	X	Equity	1	50.000				<u> </u> .	
MI										
MN										
MS					· · ·					
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1	2 3			<u> </u>		4		5	
	to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									<u> </u>
NM									
NY									
NC									
ND									
ОН		,							
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									<u> </u>
VA									
WA								1	
WV		ļ	Equity						ļ
WI		X	Equity	1	50.000		A A		ļ
WY							لامسلا	مري	
PR									<u> </u>